

Blood Glucose Log Sheet

Fax to: _____

Patient: _____ DOB: _____

Phone: (Home) _____ (Work) _____ / _____

| | Time | Rate |
|-------------|------------|-------|
| Basal Rate: | 1. 12 A.M. | _____ |
| | 2. _____ | _____ |
| | 3. _____ | _____ |
| | 4. _____ | _____ |
| | 5. _____ | _____ |

Meal Bolus: 1 Unit of insulin covers this many grams of carbohydrate. Carb Ratio: (B) _____ (L) _____ (D) _____

Insulin Sensitivity Factor: 1 Unit of insulin lowers BG _____ mg/dL

(Current BG – Target) ÷ Sensitivity Factor = Correction Dose

BG Target Range: Daytime = 90–100mg/dL

BG Target Range: Nighttime = 100–120 mg/dL

| Date ____/____/____ | 12 A.M. | 3 A.M. | Pre-Brkfst | Post-Brkfst | Pre-Lunch | Post-Lunch | Pre-Dinner | Post-Dinner | Bedtime |
|---------------------|---------|--------|------------|-------------|-----------|------------|------------|-------------|---------|
| Time | | | | | | | | | |
| Blood Glucose | | | | | | | | | |
| Carb Grams | | | | | | | | | |
| Food Dose | | | | | | | | | |
| Correction Dose | | | | | | | | | |
| Total Bolus | | | | | | | | | |

| Date ____/____/____ | 12 A.M. | 3 A.M. | Pre-Brkfst | Post-Brkfst | Pre-Lunch | Post-Lunch | Pre-Dinner | Post-Dinner | Bedtime |
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| Blood Glucose | | | | | | | | | |
| Carb Grams | | | | | | | | | |
| Food Dose | | | | | | | | | |
| Correction Dose | | | | | | | | | |
| Total Bolus | | | | | | | | | |

Notes:

